SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION	API NO. 15- (Drilling completed 10-10-54)
RECOMPLETION FORM	County Graham East
ACO-2 AMENDMENT TO WELL HISTORY	E/2 SW NW Sec. 11 Twp. 10S Rge. 21 X West
Operator: License # 5135	3300 Ft. North from Southeast Corner of Section
Name: John O. Farmer, Inc.	4290 Ft. West from Southeast Corner of Section
Address: P.O. Box 352	(NOTE: Locate well in section plat below.)
City/State/Zip: Russell, KS 67665	Lease Name Miller Well # 7
Purchaser: Mobil Oil Corporation	Field Name Cooper Producing Formation "lower" Arbuckle
Operator Contact Person: Marge Schulte Phone: (913) 483-3144	Elevation: Ground 2264' KB 2269'
Designate Type of Original Completion X New Well Re-Entry Workover	5280 4950 4620
Date of Original Completion October 10, 1954	4290 3960
Name of Original Operator Jones, Shelburne & Farmer, Inc.	3630
Original Well Name Miller #7 Date of Recompletion:	1990 N
Date of Recompletion:	7 1990
	1650 11320
Commenced Completed Re-entry Workover	990
Re-entry Workover A	330
Designate Type of Recompletion/Workover: X Oil SWD Temp. Abd.	5280 44950 44950 3860 3360 3300 1320 1320 990 660 660
Gas Inj Delayed Comp. Dry Other (Core, Water Supply, etc.)	K.C.C. OFFICE USE ONLY
X Deepening Re-perforation	F Letter of Confidentiality Attached C Wireline Log Received
Plug Back PBTD	C Drillers Timelog Received
Conversion to Injection/Disposal	Distribution
Is recompleted production:	KCC
Commingled Docket No	(Specify)
"upper" Dual Completion Docket No Arbuckle Other (Disposal or Injection?)	
was squeezed off Docket No.	
INSTRUCTIONS: This form shall be completed in triplicate a Derby Building, Wichita, Kansas 67202, within 120 days apply. Information on side two of this form will be held and submitted with the form. See rule 82-3-107 for confide wireline logs and driller's time logs (not previously submit prior to or with this form for approval of commingling or CP-111 with all temporarily abandoned wells. NOTE: Convapproval before use; submit form U-1.	of the recompletion of any well. Rules 82-3-107 and 82-3-141 confidential for a period of 12 months if requested in writing entiality in excess of 12 months. One copy of any additional tted) shall be attached with this form. Submit ACO-4 or ACO-5 dual completions. Submit CP-1 with all plugged wells. Submit
All requirements of the statutes, rules and regulations promul with and the statements berein are complete and correct to t	gated to regulate the oil and gas industry have been fully complied he best of my knowledge.
11/1/11/20	e President Date 5-4-90
John O. Farmer III	
Notary Public Managet a, Schulte	
Margaret A. Schulte	MARGARET A. SCHULTE
ORIGINAL	My Appl. Exp. FORM ACO-2
- 1 1 0 1 1 0 1 1 km	1-27-13

SIDE TWO

			SIDE 140	25171	Well #
rator NameJo	ohn O. Farmer	, Inc.	Lease Name	Miller	Well #
	☐ Ea	st			
. 11 Twp. 10S	Rge. $\frac{21}{}$ \mathbb{K} We	st	County	Graham	
		RECOMPLETIC	ON FORMATION DESCR	RIPTION	
• •		. 🗆	Log X Sampl	.e	
			203	Top	Bottom
Name					
·				00001	20/11
"lower" An	rbuckle		* .	3833 *	3841'
The well was th	nen deepened	from 3833-41	L' and comple	ted open hole i	ff with 100 sks. cemer n the "lower" Arbuckle
·				DECUBL.	·
		ADDITIONAL C	EMENTING/SQUEEZE		
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and F	Percent Additives
Perforate			100 sks.	3/4% Halad 9	
Protect Casing Plug Back TD	3814' 3833'	Class A	100 585.		
X Plug Off Zone					
				·	,
·					
Shots Per Foot	Specify Footage	PERFORATION RECO	RD Perforated	Acid, Fracture, (Amount and	Shot, Cement Squeeze Record Kind of Material Used)
				None	
Open Hole	303				
					·
	<u> </u>				
			<u> </u>		
·					
PRTD 384	1'	Plug Type	N/A		
	i i		THE THE DECOR	1	
2 1/2!	Set At	3810'	Packer At	N/A Was	Liner Run YX_
			1.101		
		l or Injection			
		l or Injection _	Bbls. Wate	r Bbls.	Gas-Oil-Rati
		Oil	Bbls. Wate	r Bbls.	Gas-Oil-Rati